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TO:	FROM:
Mail Stop Amendments	Jason D. Kelly
COMPANY:	DATE:
U.S. Patent & Trademark Office	MARCH 30, 2006
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
571-273-8300	3
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	1023-224US01
RE:	APPLICATION SERIAL NUMBER:
Supplemental Information Disclosure Statement	10/696,781

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Richard B. North; Jeffrey M. Sieracki	Confirmation No.	7934
Serial No.:	10/696,781		
Filed:	October 29, 2003	Customer No.:	28863
Examiner:	Unknown		
Group Art Unit:	3762		
Docket No.:	1023-224US01		
Title:	NEUROSTIMULATION THERAPY MANIPULATION		

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CERTIFICATE UNDER 37 CFR 1.8 I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office on March 30, 2006.

By: Shirley A. Bettach
Name: Shirley A. Bettach

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendments
Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits the references listed on the attached form PTO-1449. This statement is being filed, to the best of Applicant's knowledge, before the receipt of a first Office Action on the merits.

Copies of the U.S. patents are not enclosed as this requirement has been waived by the U.S. Patent Office.

Respectfully submitted,

Date: 3/30/06

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Date Mailed: March 30, 2006

Page 1 of 1

Form 1449*	Docket Number: 1023-224US01	Application Number: 10/696,781
INFORMATION DISCLOSURE STATEMENT IN AN APPLICATION <i>(Use several sheets if necessary)</i>	Applicant: Richard B. North; Jeffrey M. Sieracki	
	Filing Date: October 29, 2003	Group Art Unit: 3762
	Examiner Name: Unknown	

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Initial	Document Number	Publication Date	Country	Translation	
				Yes	No

OTHER DOCUMENTS (Including Authors, Title of Item, Page(s), Vol/Issue No., Publisher, Place of Publication)

***Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.**

Based on Form PTO-FB-A820
(Also Form PTO-1419)

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